CITY OF SAN BUENAVENTURA - P.O. BOX 99 - VENTURA, CALIFORNIA 93002-0099

VENTURA, CALIFORNIA 93002-0099

Paid to: 75210

07/05/2018

210292

VENTURA, CALIFORNIA 9	3002-0099 , 4,4 10	, 10210		
PAYMENT DATE I	NVOICE NUMBER	INVOICE DESCRIPTION/PO#	VENDOR ID	NET AMOUNT
7/5/2018 1732	6600	100005363	75210	220.56
Page 239 of 250			Check Amount:	220.56

CITY OF SAN BUENAVENTURA - P.O. BOX 99 - VENTURA, CALIFORNIA 93002-0099

VENTURA, CALIFORNIA 93002-0099

Paid to: 75210

07/05/2018

210292

VENTURA, OALII ORNIA 30002-0033						
PAYMENT DATE	INVOICE NUMBER	INVOICE DESCRIPTION/PO#	VENDOR ID	NET AMOUNT		
7/5/2018	17326600	100005363	75210	220.56		
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D 000 / 050	<u>'</u>					
Page 239 / 250			Check Amount:	220.56		

PAYABLE AT VENTURA MAIN BRANCH

BANK OF AMERICA

VENTURA, CALIFORNIA

TO THE CITY TREASURER CITY OF SAN BUENAVENTURA VENTURA, CALIFORNIA 93002-0099

07/05/2018

210292

16-66/1220

PAY

****\$220.56

то THE **ORDER** OF

FINANCE & TECHNOLOGY

REQUEST FOR PAYMENT FORM

FROM: Deptidiv	ision. <u>Polic</u>	e business	Service Date	#. <u>0/13/10</u>				
MAKE PAYABLE Vendor/Employe		or# <u>WS</u> [
Tax I.D.#/Social	Security #		☐ F	Partial Payr Final Paym Petty Cash	ent on E	ncumbran	nce # <u>10005363</u> ce #	
Street/P O Box N	do.			วัยแร Cash Other Paym		ennenn		
325 Spring Lake				QUIRED		AYMEN	Т	
City State, Zip	<u>DIIVO</u>			Payee ar			•	
Itasca, IL 60143	.			Payee N			e	
114004, 12 001-10	•		, Ш	. ayoo		•pe.j		
Description of disbursement		or servi		rpose of es of Ser		Unit Price	Amount	
Payment per P	O							
Inv 17326600					·		220.56	
					÷			
1								
						Total	\$220.56	
Special Instruc	tions:							
	Account	Project	Sub-Project	Fund				
Encumbrance #	AAAAA	PPPPP	SSSSS-XXX		Amo			
100005363	52218	43100	43100-100	01	220.56	3 '		
					1			
	J		Tot	al: \$ <u>220.56</u>	<u>i</u>			
I. Alvarado Requestor Requestor Sign	UL	6-13	nsion	220.5 Date	<u>6</u>			
N S	2			MAILI	NG INS	TRUCTIO	NS:	
Authorized Sign	iaturé/Date							
						as addres		
Signature (Rece	eiving Cash	1)/Date			eturn che 	ck to Depa	arunent	
Signature (11eoc	Jiving Oddi	.,, Date		, w				



W,S, DARLEY & CO.

DARLEY FIRE EQUIPMENT DIVISION

325 SPRING LAKE DR. • ITASCA, IL 60143

Toll Free: 800-323-0244 • Phone: 630-735-3500 • FAX: 630-735-3560

FEIN 36-0976610 DUNS 005094842 CAGE 15852

Invoice

ORIGINAL 17326600

Invoice #: 17326600 Invoice Date: 6/6/2018 Customer #: 40655589

Due Date:

40655589 6/21/2018

Bill To:

CITY OF VENTURA 501 POLI ST VENTURA CA 93001-2697 United States Sold To CITY OF VENTURA 501 POLI ST VENTURA CA 93001-2697 United States

Phone: 805 658.4719

•ap@cityofventura.ca.gov

Customer PO	Terms	Ship Via	FOB/Carrier	Sales Order	Salesperson
100005363	Net 15 Days		UPS OR BEST	233823/SO	MICHAEL WHITLAW
			FOB Destination		

Line #	Part No	Description	QTY	UOM	Price	Ext Price
3.000	BN636	GIMBAL ADAPTER, ZENMUSE XT	2	EA	\$102.35	\$204.70
		FOR MATRICE 200 SERIES DRONE				1
		Origin: United States				
		Shipper: 218070				
		Ship Date: 6/6/2018				

Ship To:

VENTURA CITY FIRE DEPT ATTN: MATT MOORE 1425 DOWELL DR

VENTURA CA 93003-7362

United States

Net Sales: Tax: \$204.70 \$15.86

Total Invoice: Amount Paid: \$220.56 \$0.00

Total Due:

\$220.56

remition back

CITY OF SAN BUENAVENTURA - P.O. BOX 99 - VENTURA, CALIFORNIA 93002-0099

VENTURA, CALIFORNIA 93002-0099

Paid to: 75210

08/30/2018

212317

VENTURA, CALIFOR	INIA 93002-0099 I aid	10. 13210		Z I Z J I J
PAYMENT DATE	INVOICE NUMBER	INVOICE DESCRIPTION/PO#	VENDOR ID	NET AMOUNT
8/30/2018	17334632	100005363	75210	9,887.65
Page 251 of 264	·	1	Check Amount:	9,887.65

CITY OF SAN BUENAVENTURA - P.O. BOX 99 - VENTURA, CALIFORNIA 93002-0099

VENTURA, CALIFORNIA 93002-0099

Paid to: 75210

08/30/2018

212317

PAYMENT DATE	INVOICE NUMBER	INVOICE DESCRIPTION/PO#	VENDOR ID	NET AMOUNT
8/30/2018	17334632	100005363	75210	9,887.65
			·	
:				
Do 054 / 004				
Page 251 / 264			Check Amount:	9,887.65

PAYABLE AT VENTURA MAIN BRANCH

TO THE CITY TREASURER CITY OF SAN BUENAVENTURA VENTURA, CALIFORNIA 93002-0099 08/30/2018

212317

BANK OF AMERICA VENTURA, CALIFORNIA

16-66/1220

****\$9,887.65

то THE ORDER

PAY

FINANCE & TECHNOLOGY

REQUEST FOR PAYMENT FORM

FROM: Dept/Division: Police Business Service				Date:	<u>8/27/18</u>	!			
MAKE PAYABLE TO: Vendor # W S Darley Vendor/Employee Name				PAYMENT TYPE:					
Tax I.D.#/Social Security # Street/P O Box No. 325 Spring Lake Drive City State, Zip Itasca, IL 60143				☐ Partial Payment on Encumbrance # ☐ Final Payment on Encumbrance # 100005363 ☐ Petty Cash Disbursement ☐ Other Payment REQUIRED FOR PAYMENT ☐ Payee an employee ☐ Payee NOT an employee					e # <u>100005363</u> -
Description of	supplies	or servic	es and/		pose of s of Sen	dos	Uni Pric		Amount
disbursement				Date	s or Ser	vice	PIR	e	
Pyament on PC Inv 17334632	<u>ر</u>								9,887.65
1114 11 00-1002									
						·	<u> </u>		
							Tot	al	\$9,887.65
Special Instruc	tions:			-	·				
	Account	Project	Sub-Pr	oject	Fund			}	
Encumbrance #	AAAAA	PPPPP	SSSSS		FF	Amo			
100005363	52218	43100	43100-1	00	01	9,887.6	35		
1				<u></u>				1	
				_				1	
				T ()	***	\		J	
				ıotaı	: \$ <u>9,887.6</u>	<u> 55</u>			
I. Alvarado Requestor	7.6		nsion		<u>8/27/1</u> Date	<u>8</u>			
Requestor Sign	ature/Date	88	18-18						
Authorized Sign	ature/Date	1		_		NG INST			
Signature (Rece	eiving Cash	n)/Date				il check turn che			



W.S. DARLEY & CO.

DARLEY FIRE EQUIPMENT DIVISION

325 SPRING LAKE DR. ◆ ITASCA, IL 60143

Toll Free: 800-323-0244 ◆ Phone: 630-735-3500 ◆ FAX: 630-735-3560

FEIN 36-0976610 DUNS 005094842 CAGE 15852

Invoice

ORIGINAL

Invoice #: Invoice Date: Customer #:

Due Date:

17334632 8/20/2018 40655589

9/4/2018

Bill To:

CITY OF VENTURA 501 POLI ST VENTURA CA 93001-2697 United States Sold To CITY OF VENTURA 501 POLI ST VENTURA CA 93001-2697 United States

Phone: 805 658.4719

ap@cityofventura.ca.gov

Customer PO	Terms	Ship Via	FOB/Carrier	Sales Order	Salesperson
100005363	Net 15 Days		UPS OR BEST WAY FOB Destination	233823/SO	MICHAEL WHITLAW

Line #	Part No	Description	QTY	UOM	Price	Ext Price
4.000	BN634	CAMERA, ZENMUSE THERMAL 336x256; LENS 9mm Origin: United States Shipper: 223327 Ship Date: 8/20/2018	2	EA	\$4,588.24	\$9,176.48

Ship To:

VENTURA CITY FIRE DEPT ATTN: MATT MOORE 1425 DOWELL DR

VENTURA CA 93003-7362

United States

Net Sales:

\$9,176.48

Tax:

\$711.17

Total Invoice:

\$9.887.65

Amount Paid:

\$0.00

Total Due:

\$9,887.65

CITY OF SAN BUENAVENTURA - P.O. BOX 99 - VENTURA, CALIFORNIA 93002-0099

VENTURA, CALIFORNIA 93002-0099

Paid to: 75210

11/15/2018

214800

PAYMENT DATE	INVOICE NUMBER	INVOICE DESCRIPTION/PO#	VENDOR ID	NET AMOUNT
11/15/2018	17328173	100005363	75210	14,310.25
		·		
Page 181 of 191			Check Amount:	14,310.2

CITY OF SAN BUENAVENTURA - P.O. BOX 99 - VENTURA, CALIFORNIA 93002-0099

VENTURA, CALIFORNIA 93002-0099

Paid to: 75210

11/15/2018

214800

PAYMENT DATE	INVOICE NUMBER	INVOICE DESCRIPTION/PO#	VENDOR ID	NET AMOUNT
11/15/2018	17328173	100005363	75210	14,310.25
				ļ
1				
D 404 / 404				
Page 181 / 191			- Check Amount:	14,310.25

PAYABLE AT VENTURA MAIN BRANCH **BANK OF AMERICA**

TO THE CITY TREASURER CITY OF SAN BUENAVENTURA VENTURA, CALIFORNIA 93002-0099 11/15/2018

214800

VENTURA, CALIFORNIA 16-66/1220

****14,310.25

TO THE ORDER

OF

PAY

FINANCE & TECHNOLOGY

REQUEST FOR PAYMENT FORM

MAKE PAYABLE TO: Vendor # W. S. Darley Vendor/Employee Name W. S. Darley Vendor/Employee Vendor/Employ	FROM: Dept/Div	ision: <u>Polic</u>	<u>e Business</u>	<u>Service</u>	Date:	<u>11/8/18</u>					
W.S. Darley Co ☐ Partial Payment on Encumbrance # 100005363 Tax I.D.#/Social Security # ☐ Final Payment on Encumbrance # 100005363 Street/P O Box No. ☐ Other Payment 325 Spring Lake Dr REQUIRED FOR PAYMENT City State, Zip ☐ Payee an employee Itasca, IL 60143 ☐ Payee NOT an employee Description of supplies or services and/or purpose of disbursement Unit Price Payment on PO 17328173 Total \$14,310.25 Special Instructions: Interpretation of supplies or services and/or purpose of Dates of Service Interpretation of Service Payment on PO 17328173 14,310.25 Interpretation of Service of Service Interpretation of Service Interpretation of Service Interpretation of Service of Service of Service of Service of Service Interpretation of Service of Servic			or# <u>W.S.</u>	Darley	PAYN	MENT TYP	PE:				
Street/P O Box No. 325 Spring Lake Dr City State, Zip Payee an employee Payee NOT an employee Description of supplies or services and/or purpose of disbursement Dates of Service Payment on PO 17328173 Total \$14,310.25 Special Instructions: Encumbrance # AAAAA PPPPP SSSSS-XXX FF Amount 100005363 52218 43100 43100-100 01 14,310.25 Total: \$14,310.25 Interview Payment on PO 17328173 Total \$14,310.25 Authorized-Signature/Date MallING INSTRUCTIONS: Mail check as addressed Return check to Department	W.S. Darley Co										
Street/P O Box No. 325 Spring Lake Dr City State, Zip Itasca, IL 60143 Description of supplies or services and/or purpose of disbursement Payment on PO 17328173 Description of supplies or services and/or purpose of disbursement Payment on PO 17328173 Total \$14,310.25 Special Instructions: Encumbrance # Account Project Sub-Project Fund Amount Fire Amount Fire Amount 100005363 Sub-Project Fund Amount Fire Amount Fir	Tax I.D.#/Social	Security #							rance	÷#	
City State, Zip Itasca, IL 60143 Description of supplies or services and/or purpose of disbursement Dates of Service Payment on PO 17328173 Total \$14,310.25 Special Instructions: Encumbrance # AAAAA PPPPP SSSSS-XXX FF Amount 100005363 52218 43100 43100-100 01 14,310.25 Total: \$14,310.25 LAlvarado Requistor Extension Date MAILING INSTRUCTIONS: Mail check as addressed Return check to Department	Street/P O Box N	۱o.									
Description of supplies or services and/or purpose of disbursement Dates of Service Price		<u>e Dr</u>			·						
Description of supplies or services and/or purpose of disbursement Dates of Service Price Payment on PO 17328173 14,310.25 Total \$14,310.25 Special Instructions: Encumbrance # Account Project Sub-Project Fund Amount Fund Amount AAAAA PPPPP SSSSS-XXX FF Amount 100005363 52218 43100 43100-100 01 14,310.25 Total: \$14,310.25 I.Alvarado Requistor Extension Date MAILING INSTRUCTIONS: Mail check as addressed Return check to Department	•										
Dates of Service	Itasca, IL 60143	-			MΡ	'ayee N	or and	emplo	yee		
14,310.25 Total \$14,310.25			or servic	es and/			vice	1	1	Amount	
Special Instructions: Encumbrance # Account Project Sub-Project Fund Amount 100005363 52218 43100 43100-100 01 14,310.25 Total: \$14.310.25 LAlvarado Requestor Signature/Date MAILING INSTRUCTIONS: Mail check as addressed Return check to Department)									
Special Instructions: Account	17328173									14,310.25	
Special Instructions: Account											
Special Instructions: Account	-	7,								,	
Special Instructions: Account											
Encumbrance # Account Project Sub-Project Fund AAAAA PPPPP SSSSS-XXX FF Amount 100005363 52218 43100 43100-100 01 14,310.25 Total: \$14.310.25 Alvarado Requestor Signature/Date MAILING INSTRUCTIONS: Authorized: Signature/Date Mail check as addressed Return check to Department								Tota	ı	\$14,310.25	
Total: \$14,310.25 Alvarado		Account				1	Amo	unt			
Alvarado Authorized Signature/Date Mail check as addressed Return check to Department	100005363	52218	43100	43100-1	00	01	14,310	.25			
Alvarado Authorized Signature/Date Mail check as addressed Return check to Department							•				
Alvarado Authorized Signature/Date Mail check as addressed Return check to Department											
Alvarado Authorized Signature/Date Mail check as addressed Return check to Department											
Requestor Extension Date Requestor Signature/Date MAILING INSTRUCTIONS: Mail check as addressed Return check to Department					Total	: \$ <u>14,310</u>	<u>.25</u>				
Requestor Signature/Date MAILING INSTRUCTIONS: Authorized: Signature/Date Mail check as addressed Return check to Department	Requestor Extension										
Authorized:Signature/Date Mail check as addressed Return check to Department	Requestor Sign	ature/Date	/ /	<u>-a va</u>							
Mail check as addressed ☐ Return check to Department	Authorized-Signature/Date				MAILING INSTRUCTIONS:						
	Signature (Receiving Cash)/Date					Return check to Department					



W.S. DARLEY & CO. DARLEY FIRE EQUIPMENT DIVISION 325 SPRING LAKE DR. . ITASCA, IL 60143 Toll Free: 800-323-0244 • Phone: 630-735-3500 • FAX: 630-735-3560

FEIN 36-0976610 DUNS 005094842 CAGE 15852

Invoice

17328173

Invoice #: Invoice Date: 6/22/2018

Customer #: Due Date:

40655589 7/7/2018

Bill To:

CITY OF VENTURA 501 POLI ST VENTURA CA 93001-2697 **United States**

Sold To: CITY OF VENTURA 501 POLI ST VENTURA CA 93001-2697 **United States**

Phone: 805 658.4719

• ap@cityofventura.ca.gov

Customer PO	Terms	Ship Via	FOB/Carrier	Sales Order	Salesperson
100005363	Net 15 Days		UPS OR BEST	233823/SO	MICHAEL WHITLAW
	_		WAY		·
			FOB Destination		

Line#	Part No	Description	QTY	UOM	Price	Ext Price
1.000	BN635	DRONE, MATRICE 210 Origin: United States Shipper: 219250 Ship Date: 6/22/2018	2	EA	\$6,082.35	\$12,164.70
2.000	BN639	CAMERA, ZENMUSE X4S Origin: United States Shipper: 219250 Ship Date: 6/22/2018	2	EA	\$558.14	\$1,116.28

Ship To:

VENTURA CITY FIRE DEPT ATTN: MATT MOORE 1425 DOWELL DR VENTURA CA 93003-7362

United States

Net Sales:

\$13,280.98 \$1,029.27

Tax: Total Invoice:

\$14,310.25

Amount Paid:

\$0.00

Total Due:

\$14,310.25